

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA,		COURT CASE NUMBER 20-cv-1744-CFC	
DEFENDANT WALMART INC. AND WAL-MART STORES EAST, LP,		TYPE OF PROCESS SUBPOENA SERVICE	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Custodian of Records, Florida Board of Medicine, Florida Department of Health		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 4052 Bald Cypress Way, Tallahassee, FL 32399-3253		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 1	
Elizabeth Vieyra, U.S Attorney's Office 1313 N. Market St., Suite 400, P.O. Box 2046 Wilmington, DE 19899-2046 elizabeth.vieyra@usdoj.gov		Number of parties to be served in this case 1	
		Check for service on U.S.A. N/A	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Please serve subpoena w/ cover letter; Can serve Wanda Range or John Wilson. 8:00 a.m. to 5:00 p.m. Tel: (850) 245-4131.			
Signature of Attorney other Originator requesting service on behalf of: ELIZABETH VIEYRA Digitally signed by ELIZABETH VIEYRA Date: 2024.09.09 16:47:12 -04'00'		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (302) 573-6148
			DATE 9/9/2024
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No. 17
		Signature of Authorized USMS Deputy or Clerk glo 9/10/24	
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.			
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)			
Name and title of individual served (if not shown above) Wanda Range		Date 9/11/24	Time 10:45 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Address (complete only different than shown above)		Signature of U.S. Marshal or Deputy [Signature]	

Costs shown on attached USMS Cost Sheet >>

REMARKS

1 DUSM @ \$65/hr - \$65
7 miles @ \$0.67/mile - \$4.69

11:20 PM 11 SEP 2024

AO 88B (Rev. 02/14) Subpoena to Produce Documents, Information, or Objects or to Permit Inspection of Premises in a Civil Action (Page 2)

Civil Action No. 20-cv-1744-CFC

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)

I received this subpoena for (name of individual and title, if any) Wanda Range
on (date) 9/10/24.

☒ I served the subpoena by delivering a copy to the named person as follows: Wanda Range

on (date) 9/11/24; or

☐ I returned the subpoena unexecuted because: _____

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also
tendered to the witness the fees for one day's attendance, and the mileage allowed by law, in the amount of
\$ _____.

My fees are \$ 4.64 for travel and \$ 65 for services, for a total of \$ 69.64
~~0.00~~.

I declare under penalty of perjury that this information is true.

Date: 9/11/24


Server's signature

Senn Favero DUSM
Printed name and title

111 N Adams St Tallahassee, FL 32301
Server's address

Additional information regarding attempted service, etc.: